PART B - FEE(S) TRANSMITTAL

	MAY 0 6 2005		or <u>Fax</u>	P.O. Box 1450 Alexandria, Vir (703) 746-4000	or Patents ginia 22313-1450	should be considered when	
appropriate. All further indicated unless corrected maintenance fee notification	rrespondence including the sedow or directed otherwise and DEMAN	Patent, advance of in Block 1, by (a	rders and notificat  a) specifying a ne	ion of maintenance fees w correspondence address	uired). Blocks 1 through 5 will be mailed to the currents; and/or (b) indicating a sep	t correspondence address as sarate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  . 7590 02/09/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Stanislaus Aksm Hunton & William Suite 1200 1900 K Street, N.V		Ce	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.				
Washington, DC 20006					(Depositor's name)		
						(Signature) (Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/938,670	09/938,670 08/27/2001 Jens			n	60117.000007 2509		
TITLE OF INVENTION: P	OLYACRYLAMIDE HYDI	ROGEL AND ITS	USE AS AN END	OPROSTHESIS			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	. \$1400		\$300	\$1700	05/09/2005	
EXAMINER		ART UNIT (		CLASS-SUBCLASS	],		
ISABELLA, DAVID J		3738		623-023720			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of of this form is NOT	data will appear of a substitute for fi	n the patent. If an assign ling an assignment.	nee is identified below, the d	document has been filed for	
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY) 05/09/2005 SZEWDIE2 00000005 09938670							
Contrary CA Montrary Syritzarland					)1 FC:1501	1400.00	
Please check the appropriate	assignee category or categor	ries (will not be pri	nted on the patent	: 🗖 Individual 🖾 C	orporation or other private gr	oup entity Government	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
Issue Fee   A check in the amount of the fee(s) is enclosed.							
Publication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayme Deposit Account Number 30-0200 (enclose an extra copy of this form).						credit any overpayment, to	
	(from status indicated above	)		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
	MALL ENTITY status. See 3				LL ENTITY status. See 37 C		
NOTE: The Issue Fee and Printerest as shown by the reco	ublication Fee (if required) words of the United States Pate	rill not be accepted nt and Trademark	from anyone othe Office.	r than the applicant; a regi	y paid issue fee to the application is tered attorney or agent; or the	he assignee or other party in	
Authorized Signature	Harifaus of	lus		Date	ay 6, 20	205	
Types or printed name	Stanislaus Aksman		Registration No. 28,562				
Alexandria, Virginia 22313-	1450.	END I LES OR C	OMI LLILD I OF	WIS TO THIS ADDRESS	he public which is to file (and minutes to complete, includin minents on the amount of the Trademark Office, U.S. Dept. S. SEND TO: Commissioner displays a valid OMB control	ioi fatellis, f.O. box 1430,	

ATTORNEY DOCKET: 60117.000007

## <u>IN THE UNITED STATES PATENT AND TRADEMARK OFFICE</u>

Application Number

09/938,670

Confirmation No.:

2509

Applicant

Jens PETERSEN, et al.

Filed

August 27, 2001

Title

POLYACRYLAMIDE HYDROGEL AND ITS USE AS AN

**ENDOPROSTHESIS** 

TC/Art Unit

3738

Examiner:

David J. Isabella

Docket No.

60117.000007

Customer No.

21967

## MAIL STOP ISSUE FEE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

## ISSUE FEE AND PUBLICATION FEE PAYMENT TRANSMITTAL

Sir:

In accordance with the Notice of Allowance and Issue Fee Due mailed February 9, 2005, applicants are submitting herewith the Issue Fee Transmittal (Part B) in the abovecaptioned application.

A check in the amount of \$1,700.00 is attached to cover the Issue Fee and Publication Fee. In the event any variance exists between the amount enclosed and the Patent Office charges, please charge or credit any difference to the undersigned's Deposit Account No. 50-0206.

Respectfully submitted,

**HUNTON & WILLIAMS LLP** 

Dated: May 6, 2005

By:

Stanislaus Aksman

Registration No. 28,562

Hunton & Williams LLP **Intellectual Property Department** 1900 K Street, N.W., Suite 1200 Washington, DC 20006-1109 (202) 955-1500 (telephone) (202) 778-2201 (facsimile)

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